TECH CENTER 1600/2003 Docket No. 48460 (70157)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:

A Rosowsky

SERIAL NO:

09/890,112

EXAMINER: T. McKenzie

FILED:

July 26, 2001

GROUP:

1624

FOR:

PHARMACEUTICALLY ACTIVE COMPOUNDS AND METHODS OF USE

THEREOF

Mail Stop: Amendment **Commissioner for Patents**

P.O. Box 1450

Alexandria, VA 22313-1450

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to the Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 26, 2003.

Sir:

07/01/2003 HTECKLU1 00000067 09890112

01 FC:2202 02 FC:2201

54.00 OP 126,00 OP **AMENDMENT**

Applicants are in receipt of the Office Action dated February 28, 2003 and request reconsideration of the above-identified application in view of the following amendments and remarks. Please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 6 of this paper.

Remarks/Arguments begin on page 21 of this paper.

1624 B

J Practitioner's Docket No. _

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

application of: A. Rosowsky Application No.: 09/890,112

Filed: July 26, 2001

Group No.: 1624 Examiner: T. McKenzie

For: PHARMACEUTICALLY ACTIVE COMPOUNDS AND METHODS OF USE THEREOF

Commissioner for Patents P.O. Box 1450 **Alexandria, VA 22313-1450**

TECH CENTER 1600/2900

AMENDMENT TRANSMITTAL

1. Transmitted herewith is a Request for Reconsideration for this application.

STATUS

| 2. | Applic | cant is |
|----|--------|-----------------------------|
| | [X] | a small entity. A statement |
| | | [] is attached. |
| | • | [X] was already filed. |
| | []* | other than a small entity. |

EXTENSION OF TERM

"Extension of Time in Patent Cases (Supplement Amendments) -- If a timely and complete response has been filed after a NOTE: Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment after expiration of the shortened statutory period.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. SECTION 1.8(a))

. I hereby certify that, on the date shown below, this correspondence is being:

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transmitted by facsimile to the Patent and [] Trademark Office

munelle P. Chicos

Signature

Michelle P. Chicos

(type or print name of person certifying)

07/01/2003 HTECKLU1 00000067 09890112

03 FC:2251

Date: June 26, 2003

55,00 OP

(Amendment Transmittal--page 1 of 4)

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely-filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1985 (1061 O.G. 34-35).

NOTE: See 37 C.F.R. Section 1.645 for extensions of time in interference proceedings, and 37 C.F.R. Section 1.550(c) for extensions of time in reexamination proceedings.

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. Section 1.136 apply.

(complete (a) or (b), as applicable)

(a) [X] Applicant petitions for an extension of time under 37 C.F.R. Section 1.136 (fees: 37 C.F.R. Section 1.17(a)(1)-(4)) for the total number of months checked below:

| | Extension | Fee for other than | Fee for |
|-----|--------------|--------------------|--------------|
| | (months) | small entity | small entity |
| [X] | one month | \$ 110.00 | \$ 55.00 |
| [] | two months | \$ 400.00 | \$ 200.00 |
| | three months | \$ 920.00 | \$ 460.00 |
| [] | four months | \$ 1,440.00 | \$ 720.00 |

Fee: \$55.00

___ is deducted from the total fee due for the total months of extension now

If an additional extension of time is required, please consider this a petition therefor.

[]

(check and complete the next item, if applicable)

| | reque | sicu. |
|-----|-------|---|
| | | Extension fee due with this request \$ |
| | | OR |
| (b) | [] | Applicant believes that no extension of term is required. However, this conditions petition is being made to provide for the possibility that applicant has inadvertent overlooked the need for a petition for extension of time. |

An extension for _____ months has already been secured. The fee paid therefor of

4. The fee for claims (37 C.F.R. Section 1.16(b)-(d)) has been calculated as shown below

| (Col.1) | (Col. 1) (Col. 2) | | SMALL ENTITY | | | | OTHER THAN A SMALL ENTITY | |
|---|---------------------------------------|------------------|--------------|---------------|----|------------------------|---------------------------|--|
| Claims Remaining After Amendment | Highest No. Previously Paid For | Present Extra | Rate | Addit. Fee | OR | Rate | Addit. Fee | |
| 41 | 35 | 6 | \$9.00 | \$ | | \$18.00 | \$54.00 | |
| Independent Claims 3 | | | \$42.00 | \$ | | \$84.00 | \$126.00 | |
| First Presentation of Multiple Dependent Claim+ | | | \$140.00 | \$ | | \$280.0 0 | \$ * | |
| | | | | | | Total Addit. Fee | \$180.00 | |

- * If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3,
- ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

 The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

WARNING:

5.

"After final rejection or action (Section 1.113) amendments may be made canceling claims or complying with any requirement of form which has been made." 37 C.F.R. Section 1.116(a) (emphasis added).

(complete (c) or (d), as applicable)

| (c) | [] | No additional fee for claims is required. |
|-----|-------|--|
| | | OR |
| (d) | [X] | Total additional fee for claims required \$ 180.00 |
| | | FEE PAYMENT |
| [X] | Attac | hed is a check in the sum of \$41500. |
| [] | | ge Account No the sum of \$ |
| | A dur | plicate of this transmittal is attached. |

FEE DEFICIENCY

- NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).
- 6. [X] If any additional extension and/or fee is required, charge Account No. 04-1105.

AND/OR

[X] If any additional fee for claims is required, charge Account No. 04-1105.

Date: June 26, 2003

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SIGNATURE OF PRACTITIONER

John B. Alexander, Ph.D.

(type or print name of practitioner)

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BOS2_340026.1

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